

**Political Organization
Notice of Section 527 Status**

OMB No. 1545-1693

Part I General Information

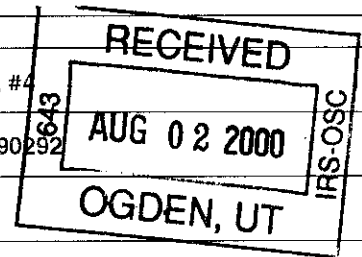
| | | |
|---|---|--|
| 1 Name of organization Assembly Democrats Voter Registration 2000 | | Employer identification number 68 0408264 |
| 2 Mailing address (P.O. Box or number, street, and room or suite number) 5435 Madison Avenue | | |
| City or town, state, and ZIP code Sacramento, CA 95841 | | |
| 3 E-mail address of organization | | |
| 4a Name of custodian of records Rita Copeland | 4b Custodian's address 5435 Madison Avenue Sacramento, CA 95841 | |
| 5a Name of contact person Rita Copeland | 5b Contact person's address 5435 Madison Avenue Sacramento, CA 95841 | |
| 6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number | | |
| City or town, state, and ZIP code | | |

Part II Purpose

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|---|
| 7 Describe the purpose of the organization General Purpose Committee |
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Part III List of All Related Entities (see instructions)

| 8a Name of related entity | 8b Relationship | 8c Address |
|---|------------------------|--|
| Wesson For Assembly | Candidate | 13016 Mindanao Way, #4 Marina Del Rey, CA 90292 |
| Friends & Neighbors Supporting | Candidate | 1700 L Street Sacramento, CA 95814 |
| Darrell Steinberg for Assembly | | |
| | | |
| | | |
| | | |



ENVELOPE JUL 31 2000
POSTMARK DATE

9a Name

9b Title

9c Address

Rita Copeland

Treasurer

5435 Madison Avenue

Sacramento, CA 95841

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

**Sign
Here**

Signature of authorized official

Date _____

